

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

XUUO

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

| | | recu | on of each violation is specified in the narrative portion of thi | is report. | | | |
|--|------------|--------|--|--------------------------------|-------------------------------|------------|------------|
| Establishm | | | | Telephone Number | Date of Inspect (mm/dd/yr) | | PERMIT# |
| 17/2/5 | & Uhion | L. | | 812 913 4647 | 1 ' . ' | • | ĺ |
| Establishm | ent Addre | ss (nu | mber and street, city, state, zip code) | 1 | Z/4/1 | Zoza | 19-227 |
| 114 E. | Marke | 1 5 | St. New Alburg, 12 47150 | 582 314 3627 | | | |
| Owner | _ | | · · · · · · · · · · · · · · · · · · · | Purpose: | Follow-up Release Date | | |
| Jon 3 | Killips | | | . Routine | NO TODAY | | |
| Owner's A | | | | 2. Follow-up | Summary of Violations: | | |
| | | | | 3. Complaint | | | |
| Person in C | | | | 4. Pre-Operational | C NC R | | |
| | Ecb | | | 5. Temporary | · L \ \ \ \ | | |
| Responsibl | e Person's | E-ma | il | 6. HACCP | Menu Type (See back of page) | | |
| | | | · | | | _ | |
| Certified F | ood Manag | ger | (12/17/23) | 7. Other (list) | 12 | 3 <u>X</u> | _45 |
| Joe_ | Primi | 25 | (12/11/23) | | <u>L</u> . | | <u> </u> |
| • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" | | | | | | | |
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" | | | | | | | |
| Section# | C/NC | R | Narrative | | | To Be Co | rrected By |
| 192 | C | | Observed (2) in-house tenter souces de | nkd 1/19 | | Disc | ا الم |
| 174 | NC | | Observed (2) in-house tenter souces daked 1/19 Disconded Observed unlabeled bulk and oil bottles in prep Corrected | | | | |
| 234 | NC | | | | | | |
| 245 | NC | _ | Observed bulk scoop without handle Corrected | | | | |
| _ | | | beined dumpster unable to close (the to vender ploeunt) Contact vinder | | | | |
| 392 | NC | | Observed dumpster unable to close (| me to vender place | | Contac | t vuder |
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| Received by (name and title printed): Inspected by (name and title printed): | | | | | | | |
| 11 f | | • | | Inspected by (name and title p | | / . | , , |
| Hunter Erbentrant General Manager A.). Ingram (EHK) | | | | | | | |
| Received by (signature): Inspected by (signature): | | | | | | | |
| The same of the sa | | | | | | | |
| cc: | | | cc: | | cc: | | |
| | | | | | | | |